ALASKA STATE LEGISLATURE SENATE HEALTH & SOCIAL SERVICES COMMITTEE



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SPONSOR STATEMENT SB 178: EXPAND EARLY INTERVENTION SERVICES 34-LS0918 Version A

Senate Bill 178 seeks to expand access to Alaska's Infant Learning Program (ILP) and provide healthcare and therapy services to more young children in Alaska who experience developmental delays. Expanding access to the program will result in more families receiving early intervention services, which will reduce the need for more intensive interventions later. Research indicates that children in early intervention programs experience improved life outcomes compared to those who did not receive early interventions. As a result, early intervention programs have a substantial return on investment.

SB 178 would expand access to the ILP system by lowering the eligibility criteria to children with a 25 percent developmental delay. This would mirror the 25 percent delay standard used for special education services. Currently, the eligibility threshold for the Alaska Infant Learning Program is set in regulation at a 50 percent delay. Compared to the rest of the nation, Alaska's eligibility criteria are overly restrictive, and there is no evidence-based rationale for not serving children with a 25% delay. Under Alaska's current restrictive eligibility structure, many healthcare providers hesitate to refer children for services because they are unsure if the child will meet the state's stringent developmental delay requirements.

In addition to expanding eligibility for the ILP system, SB 178 would enable the Alaska ILP system to access more federal Medicaid funding, thereby reducing the need for additional state general funds in the future. The bill also requires the Department of Health to review the conditions that qualify as a disability and make recommendations to the Alaska State Legislature on updating those conditions. The bill also requires the Department of Health to submit a detailed report to the legislature by July 1, 2029.

The changes to Alaska's ILP system, as included in SB 178, are based on recommendations from the Alaska Department of Health's Interagency Coordinating Council. The bill was developed with input from stakeholders across Alaska who work with disabled children and families.